

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PH	67814	9/28/55
O.I.P.E. CLASSIFIER		16	10.1.99
FORMALITY REVIEW	NO	66080	10/15/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 - ..... Allowed      I ..... Interference  
 (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	9/2/03
2	✓	✓	9/2/03
3	✓	✓	9/2/03
4	✓	✓	9/2/03
5	✓	✓	9/2/03
6	✓	✓	9/2/03
7	✓	✓	9/2/03
8	✓	✓	9/2/03
9	✓	✓	9/2/03
10	✓	✓	9/2/03
11	✓	✓	9/2/03
12	✓	✓	9/2/03
13	✓	✓	9/2/03
14	✓	✓	9/2/03
15	✓	✓	9/2/03
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18	✓	✓	9/2/03
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Claim	Final	Original	Date
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REST AVAILABLE COPY

If more than 150 claims or 10 actions  
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